

P18 000052246

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

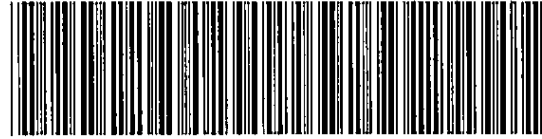
(Business Entity Name)

(Document Number)

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08/26/19 -- 01005 -- 021 -- \$35.00

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SEP 09 2019

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2019 AUG 26 PM 3:39
CLERK OF DISTRICT COURT
STATE OF MICHIGAN

O/D-Assign

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: **MONT SHASTA CORP.**
(Name of Corporation)

DOCUMENT NUMBER: **P18000052246**

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alvaro Castillo

(Name of Person)

Castillo & Associates

(Name of Firm/Company)

1390 Brickell Avenue Suite 200

(Address)

Miami, FL 33131

(City/State and Zip Code)

For further information concerning this matter, please call:

Alvaro Castillo

(Name of Person)

at (**305**) **371-5540**

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301


**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, MATIAS A. REY, hereby resign as Director
(Title)

of MONT SHASTA CORP.
(Name of Corporation)

P18000052246, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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SECRETARY OF STATE